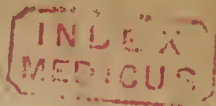
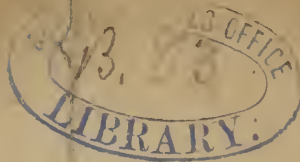


FORD (W. H.)

A reply to the Card of
Doctors Dorsett + Outley

Box 83





A REPLY TO THE CARD OF DOCTORS DORSETT AND OUTLEY.

Messrs. Editors:—My attention has been directed to a communication in your January issue, relating to my trial of super-oxygenated air, at Quarantine, last summer, and signed by Drs. Outley and Dorsett, at the time assistants to Dr. H. C. Davis.

The sentences supposed to have been underscored by Dr. Davis relate to unimportant points, but I maintain that they are as correct as any bedside notes can reasonably be. The notes were taken by me in person, at the bedside, while the patient was quite rational, and with unusual care to arrive at a correct history of the case. Their authority is the words of the *patient himself*. No other notes at all were taken in the patient's chamber, at least, while I had charge of him. I have the best reasons for believing, therefore, that all of the sentences, numbered 1, 2, 3, and 4 in the card, are quite correct, as regards the main points.

The marginal note, assumed by the signers of the card to have been written and signed by Dr. Davis, is indisputably a mistake, and Dr. Outley must be well aware of this, so far as the note may mean that I requested him (Dr. Outley) to pass a catheter, or to have one passed.

It was evidently written, if by Dr. Davis, a considerable time after the occurrence to which it alludes, in the midst of perplexing labors, and, indeed, is only now brought to light, some months after Dr. Davis' death. While I was at Quarantine I saw that Dr. Davis was greatly overworked, for he was so fatigued that he was obliged to retire soon after dark, the evening I arrived there. Boats were constantly passing, requiring his careful inspection and disinfection, and he had many sick in the wards under his personal care. These duties became more and more onerous and complex as the season advanced, and, in the midst of this unremitted strain and constant pre-occupation, it is not singular that he should be mistaken as to a point on which he does not seem to have reflected until many weeks had elapsed, while my own notes were taken at the time, and published immediately. During my visit, Dr. Davis had but little time to spare for anything not directly related to

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his official duties. I had no opportunity of conversing freely with him, and he was in the patient's chamber with me but twice, as far as I can recollect, viz: when he led me in to take charge of him, and when I reëntered the chamber, after a couple of hours' repose. It was on this latter occasion that he said to me: "We have passed a catheter, and there is no water in the bladder." I never authorized or requested *anybody* to pass a catheter or to have one passed, and I will repeat, that Dr. Ontley is quite aware, that in my instructions to him, on leaving the patient's chamber, at 3 P. M. on the 30th, the passage of a catheter was not spoken of by me at all; I simply asked him to administer the oxygen, and showed him how to do it.

The occasion alluded to, in the paragraph of the card beginning with the words, "Prior to the evening," and thus vaguely designated as to time, was when I was first introduced into Woodward's room to take charge of him, about 7 P. M. on Aug. 29th. I selected Mr. Woodward as a patient because his symptoms were such as are generally regarded as of necessarily fatal prognosis under any kind of treatment hitherto practiced, and because by instituting the experiment in a case otherwise utterly hopeless, I would put the matter at once to the severest test that could be applied to it. In taking up a catheter, when I first entered the room, I was about to procure some urine for testing for albumen. I never pass a catheter in yellow fever for a mere diagnosis of *suppression* as against *retention*, but only when I am particularly anxious to get the urine for an early diagnosis and prognosis, nor do I do so even then, when good reasons exist in the special case that a catheter should not be passed. When Dr. Davis hinted that there was suppression, I determined not to pass the catheter, for I did not wish to prove to the patient, who was a very intelligent man, that he had the deadly symptom, suppression. Nor did I wish to subject him to a harrassing and often very painful process, for which in a case of suppression, in 1854, I have seen anæsthesia required, when I expected the kidneys to act of their own accord, if the hypothesis, under which the inhalations of oxygen were to be instituted, was correct. I therefore, after administering jaborandi, and causing him to inhale the oxygen for some hours, placed a saucer under his penis, every time he sat upon the chamber-pot, to catch what urine, if any, might be passed while he was at stool. I thus patiently waited, all through the night and half the next day, *during seventeen hours, viz: from 7:40 P.*

Communications.

M. on the 29th to 12:30 P. M. on the 30th, when, as I have stated in my account of the case, the patient passed some dozen drops of urine, which were all I ever got for physical examination, into this saucer, referred to in my article as "a separate receptacle." Thus it was, that although particularly anxious from the first, to determine the presence or absence of albuminuria in the case, on account of its importance in a diagnostic and especially in a prognostic point of view, and because *albuminuria* presupposes that very local paralysis of the blood-vessels which I was anxious to relieve, and, consequently, to establish *as existing* in the case under experiment, I *nevertheless* carefully refrained from passing even one of the soft rubber catheters, which I had carried down with me. I was fearful of irritating and annoying a man so gravely ill, and of demonstrating to him by any act of mine that could possibly be avoided, that what he knew from experience in yellow fever as a nurse in Memphis, very lately, to be a deadly symptom, was present in his own case. I will, therefore, take the trouble to repeat the words of my original paper, viz: that *I did refrain entirely and with unbroken determination from passing a catheter*, and that a catheter *was passed, without consulting me*, though I was within reach near by, and had asked to be called if any new feature presented itself in the case. The catheter was passed, moreover, *entirely in opposition to my intentions*, and when the case had been recognized as one of suppression by those who passed it, for the signers of the card assert that Dr. Davis declared in their presence, on a "*prior*" occasion, which was twenty-two hours previously, that suppression existed.

When I re-entered the apartment, and was told that the catheter had been passed, and the fact of his suppression thus unfortunately revealed to the patient, I was greatly shocked, and promptly accepted the occurrence as an unmistakable and intentional intimation to me that the Quarantine staff, for reasons of their own, had become desirous of reassuming the conduct of *their patient's case*, and I knew that my enterprise was at an end. I was much surprised to find that the patient had refused to respire the oxygen any longer, for he had been remarkably docile as long as I was in the room with him, sleeping quietly in long naps, between the inhalations, and even *while inhaling*, sometimes. That he might become tired of inhaling in course of time, I was prepared to expect, but thus far, I had seen no

Ford.—Yellow Fever.

indication of the kind. Had he become refractory with me, I would have used my best powers of persuasion to encourage him to persist in a measure which I knew gave him the only chance he had for his life, while it was in itself incapable of doing him any harm, and perfectly compatible with other medication, which I did not neglect, and was prepared to press more strongly still, as soon as I thought it likely to be successful. As he had ceased to inhale the oxygen, I knew that the local congestions would become re-established, and that he would soon get worse again, and surely die; I could do no more, however, so, after some consultation appropriate to the circumstances, I left for the city on the steamer.

I have elsewhere stated my reasons for assuming that many of the worst symptoms of the case were alleviated under the influence of the inhalations; *adepts* in the symptomatology and treatment of yellow fever can judge of this from the detailed notes I have published. Dr. Davis himself admitted that the man was better, in a remark at dinner, about 2:30 P. M., on the 30th of August, attributing the improvement, however, to some champagne he had ordered for him, of which Woodward had taken a glass or two the day before. The fact that he slept, and wanted to sleep, is enough of itself to prove that he was better, for the proper accompaniments of suppression are fearful anxiety, jactitation and delirium or coma, and not easy sleep and desire for repose.

A bare modicum of modesty would have prevented the young men, who have emitted this ill-advised card, from expressing their opinions on points of my treatment, while as yet mere internes of less than half a year's graduation at the time of my visit.

I was at Quarantine by the authority of the Health Commissioner, and with the consent of their superior. Had they shown, at that time, a proper desire for information concerning the motives of my conduct, and the import of an experiment I was conducting in the interests of science, at the greatest personal inconvenience—one, indeed, which ought to have been profoundly interesting to them—they might have saved themselves the discredit of this absurd and gratuitous publication, whose main affirmations they have not ventured to endorse.

W. HUTSON FORD, M. D.

2945 Gamble street, St. Louis, Mo., Jan. 20, 1879.



